

Express Mail No.: EV328703665
Date of Deposit: July 28, 2003

A. ney Docket No.: 26448-506

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Egan *et al.*

SERIAL NUMBER: 10/038,112

EXAMINER: Cybille Delacroix-Muirheid

FILING DATE: December 31, 2001

ART UNIT: 1614

FOR: METHOD FOR TREATING GLAUCOMA IC

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

July 28, 2003
Boston, Massachusetts

TRANSMITTAL LETTER

Transmitted herewith for filing in the above-referenced patent application are the following documents:

- ☒ Response to Election of Species Requirement (1 page);
- ☒ A copy of Revocation by Assignee and New Power of Attorney filed July 11, 2003 (2 pages);
- ☒ Petition of Extension of Time for three months (1 page);
- ☒ Check No. 16760 in the amount of \$465.00; and
- ☒ Return Postcard.

Although the Applicants believe that no fees are due, the Commissioner is hereby authorized to charge any fees that may be due to Deposit Account No. 50-0311 (Ref. No. 26448-506). If the enclosed papers are considered incomplete, the Mail Room is respectfully requested to contact the undersigned collect at (617) 542-6000, Boston, Massachusetts.

Respectfully submitted,

Matthew Paras Reg No. 50,572

Ivor R. Elrifi, Reg. No. 39,529
Matthew J. Golden, Reg. No. 35,161
Attorney for Applicant
MINTZ, LEVIN, COHN, FERRIS,
GLOVSKY AND POPEO P.C.

Address all written correspondence to
Customer no.: 30623
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EV328703665US

TRA 1818152v1

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Fax Cover Sheet

DATE: February 9, 2004

FROM: Matthew Pavao, Ph.D.

Direct Dial 617 348 4707
mpavao@mintz.com

TO:

NAME	COMPANY	BUSINESS #	FAX #
Examiner Cybille Delacroix-Muirheid Art Unit 1614	USPTO	571-272-0572	571-273-0572

MESSAGE:

Dear Examiner Delacroix-Muirheid:

As discussed in our telephone call, please find attached a copy of the Revocation by Assignee and New Power of Attorney for U.S.S.N. 10/038,112, which was originally filed by Express Mail on July 11, 2003. Also, find attached a copy of the Response to Election of Species Requirement and related papers which were originally filed by Express Mail on July 28, 2003.

Finally, find attached the Express Mail Labels date stamped by the U.S. Post Office and the Return Postcards date stamped by the USPTO for the above-identified submissions. Please do not hesitate to contact me with any questions.

Regards,

Matthew Pavao
Reg. No. 50,572

Attorney Docket No. 26448-506
Serial No.: 10/038,112
Filed: December 31, 2001
Applicant: Egan et al.

We are sending a total of 12 pages, including this cover sheet.

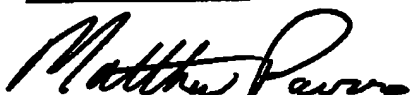
Please call us at 617.348.4707, if you experience any problems.

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Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on February 9, 2004



Signature

Matthew Pavao

Name of person signing the Certificate

The papers submitted with this facsimile include:

1. Copy of the Originally filed Revocation by Assignee and New Power of Attorney
2. Copy of the Originally filed Response to Election of Species Requirement
3. Copy of Return Postcards date stamped by the U.S.P.T.O.
4. Copy of Express Mail Labels date stamped by the U.S. Post Office

TRA 1883468v1

Express Mail No.: EV328705476U
Date of Deposit: July 11, 2003

Attorney Docket No.: 26448-506

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Egan *et al.*

SERIAL NUMBER: 10/038,112

EXAMINER: Cybille Delacroix-Muirheid

FILING DATE: December 31, 2001

ART UNIT: 1614

FOR: METHODS FOR TREATING GLAUCOMA IC

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

July 11, 2003
Boston, Massachusetts

TRANSMITTAL LETTER

EV328705476US

Transmitted herewith for filing in the above-referenced patent application are the following documents:

- ☒ Revocation by Assignee and New Power of Attorney (2 pages); and
- ☒ Return Postcard.

Although the Applicants believe that no fees are due, the Commissioner is hereby authorized to charge any fees that may be due to Deposit Account No. 50-0311 (Ref. No. 26448-506). If the enclosed papers are considered incomplete, the Mail Room is respectfully requested to contact the undersigned collect at (617) 542-6000, Boston, Massachusetts.

Respectfully submitted,



30623

PATENT TRADEMARK OFFICE

Matthew Puro Reg No. 50,572
Ivor R. Elrifi, Reg. No. 39,529
Matthew J. Golden, Reg No. 35,161
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Date: July 11, 2003

TRA 1813707v1

Serial No. 10/038112 File No. 26448-506 By: IRE/MJG/HAE/MP

Title: Method for Treating Glaucoma IC



Application of Egan et al Date: 12/31/01

The U.S. PTO Mail Room acknowledges receipt of the following on the date stamped hereon:

<input type="checkbox"/> Req. for CPA under 37 CFR 1.53(d)	<input type="checkbox"/> Provisional Application Cover Sheet
<input type="checkbox"/> Change of Attorney's Address	<input type="checkbox"/> Inf. Discl. Statement, PTO Form 1449
<input type="checkbox"/> New Power of Attorney	<input type="checkbox"/> References Cited
<input type="checkbox"/> Patent Application	<input type="checkbox"/> Copy of Notice to File Missing Parts
<input type="checkbox"/> Non-provisional (<input type="checkbox"/> Provisional	<input type="checkbox"/> Amendment/Response <u>1pg</u>
Incl. <u> </u> pages, (<u> </u> pgs) Specification,	<input type="checkbox"/> Petition for Ext. of Time (x2) <u>1pg</u>
(<u> </u> pgs) Abstract, (<u> </u> pgs) Claims	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Design Patent Application	<input type="checkbox"/> Letter to Official Draftsperson
<input type="checkbox"/> Declaration(s)	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Drawings <u> </u> sheet(s) (FIGS. <u> </u>)	<input type="checkbox"/> Brief (x3)
<input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input type="checkbox"/> Check for \$ <u>465.00</u> Check # <u>16760</u>
<input type="checkbox"/> Verified Statement claiming small entity status	<input type="checkbox"/> Transmittal Letter (x2) <u>1pg</u>
<input type="checkbox"/> Assignment and Cover Sheet	<input type="checkbox"/> Cert. of Mailing under 37 CFR 1.8(a)
	<input checked="" type="checkbox"/> Express Mail Label No. <u>EV328703665US</u>

☒ Other Copy of Revocation by Assignee and New Power of Attorney (2pgs)

DATE MAILED July 28, 2003


 EV 328703665 US		 EXPRESS MAIL UNITED STATES POSTAL SERVICE®		Customer Copy Label 11-F June 2002
ORIGIN (POSTAL USE ONLY)		DELIVERY (POSTAL USE ONLY)		
PO ZIP Code <u>02005</u>	Day of Delivery <input checked="" type="checkbox"/> First <input type="checkbox"/> Second	Flat Rate Envelope <input type="checkbox"/>	Delivery Attempt Mo. <u> </u> Day <u> </u> Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Date Mo. <u>7</u> Day <u>28</u> Year <u>03</u>	Postage <input checked="" type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th <input type="checkbox"/> 5th <input type="checkbox"/> 6th <input type="checkbox"/> 7th <input type="checkbox"/> 8th <input type="checkbox"/> 9th <input type="checkbox"/> 10th <input type="checkbox"/> 11th <input type="checkbox"/> 12th	Return Receipt Fee	Delivery Attempt Mo. <u> </u> Day <u> </u> Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
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FROM: (PLEASE PRINT) MINTZ LEVIN CORP 600 VIKING ST BOSTON MA 02111-2021 Attention: Dr. Ivor Elrifi 26448-506 (IRE/MJG/HAE/MP)		TO: (PLEASE PRINT) Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		
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Serial No. 10/0380112 File No. 26448-506 By: IRE/MJC/MPTitle: Methods for Treating Glaucoma ICApplication of Egan et al. Date: 12/31/01

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| <input type="checkbox"/> Req. for CPA under 37 CFR 1.53(d) | <input type="checkbox"/> Provisional Application Cover Sheet |
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| <input checked="" type="checkbox"/> New Power of Attorney 2pgs (revocation) | <input type="checkbox"/> References Cited |
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| <input type="checkbox"/> Non-provisional <input type="checkbox"/> Provisional | <input type="checkbox"/> Amendment/Response |
| incl. _____ pages, (_____ pgs) Specification, | <input type="checkbox"/> Petition for Ext. of Time (x2) |
| (_____ pgs) Abstract, (_____ pgs) Claims (_____ # claims) | <input type="checkbox"/> Issue Fee Transmittal |
| <input type="checkbox"/> Design Patent Application | <input type="checkbox"/> Letter to Official Draftsperson |
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| <input type="checkbox"/> Drawings _____ sheet(s) (FIGS. _____) | <input type="checkbox"/> Brief (x3) |
| <input type="checkbox"/> Formal <input type="checkbox"/> Informal | <input type="checkbox"/> Check for \$ _____ Check # _____ |
| <input type="checkbox"/> Verified Statement claiming small entity status | <input checked="" type="checkbox"/> Transmittal Letter (x2) 1pg |
| <input type="checkbox"/> Assignment and Cover Sheet | <input checked="" type="checkbox"/> Cert. of Mailing under 37 CFR 1.8(a) |
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ORIGIN (POSTAL USE ONLY) ZIP Code <u>09205</u> Date In <u>7/11/03</u> Mo. <u>July</u> Day <u>11</u> Year <u>2003</u> Time In <u>PM</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM Weight <u>2.3</u> lbs. No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		DELIVERY (POSTAL USE ONLY) Delivery Attempt <input type="checkbox"/> Time <input type="checkbox"/> AM <input type="checkbox"/> PM Mo. <u>July</u> Day <u>11</u> Delivery Attempt <input type="checkbox"/> Time <input type="checkbox"/> AM <input type="checkbox"/> PM Mo. <u>July</u> Day <u>11</u> Delivery Date <input type="checkbox"/> Time <input type="checkbox"/> AM <input type="checkbox"/> PM Mo. <u>July</u> Day <u>11</u>		Employee Signature _____ Employee Signature _____ Employee Signature _____
Flat Rate Envelope <input type="checkbox"/> Postage <u>\$ 1.305</u> Return Receipt Fee <input type="checkbox"/> COD Fee <input type="checkbox"/> Insured Fee <input type="checkbox"/> Total Postage & Fees <u>\$ 1.305</u>		Federal Agency Acct. No. or Postal Service Acct. No. _____		
FROM: (PLEASE PRINT) MINTZ LEVIN COHN PERKIS GLOVSKY & POPOV PC 1 FINANCIAL CT BOSTON MA 02111-2621 Attention: Dr. Ivor Elrif1 26448-506 (IRE/MJC/MP)		TO: (PLEASE PRINT) Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		
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